

DEPARTMENT OF THE ARMY  
HEADQUARTERS, WALTER REED ARMY MEDICAL CENTER  
6900 Georgia Avenue, NW  
Washington, DC 20307-5001

HR-9 Nursing Policy

24 June 2005

**Private Duty Nursing Services**

**1. PURPOSE:** To provide guidance to all nursing personnel in the management of private duty nurses.

**2. SCOPE:** Applies to all nursing personnel.

**3. REFERENCES:**

WRAMC Regulation 600-1, Human Resources, 3 May 2005

**4. GENERAL INFORMATION:**

a. Private duty nurses or paid sitters may be hired by patients or their families to perform custodial services as outlined in section 6 of this policy.

b. Private duty nurses or paid sitters cannot be used in the Intensive Care Units, Operating Rooms or Post Anesthesia Care Unit.

c. Military personnel assigned to WRAMC are not authorized to engage in "fee-for-services" private duty nursing at WRAMC.

d. WRAMC nursing personnel will not engage in the selection or recommendation of private duty nurses.

**5. RESPONSIBILITIES:**

a. The Head Nurse is ultimately responsible for the nursing care provided on the unit.

b. The Team Leader or Charge Nurse must supervise the care provided to patients by private duty nurses or sitters.

c. The Team Leader or Charge Nurse will monitor the activities of the private duty nurse or sitter and ensure that the care provided meets standards.

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This NPOL has been relabeled, previously labeled NPOL HR-11 and supersedes HR-11 dated 11 July 2002.

d. The Head Nurse or Charge Nurse will assign a nursing staff member to patients cared for by a private duty nurse or sitter. The nursing staff member and Team Leader or Charge Nurse will be held accountable for the care provided.

e. The private duty nurse or sitter must report to the Charge Nurse at the beginning of the shift.

f. The patient's family or the patient is responsible for any financial arrangement or contract with the individuals independent of WRAMC.

g. The private duty nurse or sitter will in-process through the Nursing Human Resources Office (HRO) prior to his/her first day at WRAMC:

1) The nursing HRO will make a copy of the person's Driver's License and ensure contact information (name, address and telephone number) is documented and maintained in a file throughout the duration of the patient care activities.

2) The private duty nurse or sitter will complete the Short Term (Forensic) Staff Orientation in accordance with WRAMC Reg 600-1. This form will be kept in the same file maintained by nursing HRO.

## **6. SCOPE OF CARE:**

a. The activities listed below are the **only** authorized patient care activities that may be performed by a private duty nurse/sitter:

1) Patient care activities and related non-professional services necessary in caring for the personal needs and comfort of a patient, such as providing fresh water and ice, assisting in transporting the patient to and from appointments via wheelchair or litter, reading to the patient, and/or ensuring a clean and safe patient care environment.

2) Help with activities of daily living such as dressing, undressing, oral feedings, personal hygiene, assisting the patient to and from the restroom or assisting with the bedpan/urinal, and turning/repositioning of the patient.

3) Monitor and track intake and output measurements which then must be reported to the nursing staff member assigned to the patient for documentation in the medical record.

4) Report to the Charge Nurse any unusual changes or reactions to medications or treatments.

5) Maintain patient confidentiality.

b. Professional nursing activities such as those listed below are **NOT** authorized:

- 1) Administer blood, chemotherapy or controlled substances.
- 2) Initiate intravenous infusions or draw blood for laboratory procedures.
- 3) Monitor vital signs.
- 4) Administer any type of medications.
- 5) Mix or hang emergency medications.
- 6) Instill additives into any intravenous lines.
- 7) Take verbal or written orders from a physician.
- 8) Carry the unit keys or otherwise have access to medications and controlled substances or supply room.
- 9) Document in the patient's medical record.

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